

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO 470)						SERIAL NO. 10/814497 APPLICANT(S)		FILING DATE			
						CLAIMS					
AS FILED		AFTER INADJUSTMENT		AFTER INADJUSTMENT							
NO.	OFF.	NO.	OFF.	NO.	OFF.	NO.	OFF.	NO.	OFF.	NO.	OFF.
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